



# APPLICATION FOR PRE-BID QUALIFICATION

State Form 43380 (R2 / 9-06)

Approved by State Board of Accounts, 2006

## ALCOHOL & TOBACCO COMMISSION

Type of permit

**NOTE:** This form is for Permittee Evaluation and shall **NOT** be assumed as FINAL APPROVAL FOR ANY PERMITTEE.

Name of county	City or area
File number	Basic annual permit fee
<b>NOTE:</b> Attach bid security (certified or cashiers check only) in the amount of the basic annual permit fee for the type of permit and amount indicated above.	

APPLICANT INFORMATION	
Name of applicant ( <i>name of person, partnership, corporation, LLC or LP who will hold the permit</i> )	
Home address ( <i>number and street</i> )	
City, state, and ZIP code	E-mail address
Business telephone number	Home telephone number
Will this application be for: <input type="checkbox"/> Sole Ownership <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> LP	
<b>SOLE OWNER / PARTNERSHIP PERMIT:</b>	
If applying as a sole owner or partnership for any type permit, then answer this question: 1. Are you now and have been for the last five (5) years a continuous resident of the State of Indiana? ( <i>Partnership drug store and grocery store permits are exempt from this residency requirement.</i> )	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>NOTE:</b> These types of permits (106, 107, 111, or 116) must be located in immediate proximity to the unincorporated named area of the existing permit. I hereby understand that if I am the successful bidder I must make application in accordance with this geographical requirement or forfeit my bid security.	
<b>CORPORATION / LLC / LP PERMIT:</b>	
If applying as a corporation for any type permit, then answer this question: 1. Is at least 60% of the outstanding common stock owned by persons who have been continuous and bona fide residents of this State for five years? 2. If a beer wholesaler, is at least 60% of the outstanding common stock owned by persons who have been continuous and bona fide residents of this State for one year? ( <i>Drug stores and grocery stores are exempt from this residency requirement.</i> )	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>NOTE:</b> Retailer corporations applying for Types 103, 106, 112, 210 and 303 with 41% or more of the stock held by out of state stockholders <b>MUST EXECUTE AN AFFIDAVIT OF INTENT</b> that the establishment's annual gross food sales of the proposed permit location will exceed one hundred thousand dollars. Failure of high bidder to execute said affidavit will result in forfeiture of bid security.	
THE ANSWERS TO THESE QUESTIONS PERTAIN TO <b>ALL PERSONS</b> HAVING AN INTEREST IN THIS APPLICATION.	
1. Have any persons having an interest in this permit been convicted of a felony or a misdemeanor ( <i>other than a traffic violation</i> )? If yes, explain and attach copy of judgement and details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have any persons having an interest in this application ever been convicted of a violation of the Indiana Alcoholic Beverage laws, rules, regulations, or orders of the Commission? If your answer is yes, explain, and attach copy of details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are all interested parties citizens of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are all interested parties 21 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Are all interested parties of good moral character and good repute in the community in which they reside?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Are all interested parties of sound mind?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Are any interested parties a mayor, a law enforcement officer, or an officer of a municipal corporation, or governmental subdivision, or of this state charged with any duty or function in the enforcement of this title?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Have any interested parties held a permit under this title and had the permit revoked within one year prior to the date of application for a permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Have any interested parties made an application for a permit of any type which has been denied less than one year prior to this application for a permit? ( <i>Unless the application was denied by reason of a procedural or technical defect.</i> )	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Do any interested parties hold any other permit of any kind connected with the sale of alcoholic beverages in Indiana, or do they have any interest in any such permit, directly or indirectly, through ownership of stock or otherwise? If yes, list permit numbers.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Permit numbers	
I declare all of the answers given herein and on the accompanying forms and schedules are true and correct. I understand that it is a felony under law to misrepresent or falsify any portion of this application or attached documents.	
Signature of applicant	Date ( <i>month, day, year</i> )